## SERIAL NO. FILING DATE **CLAIMS ONLY** APPLICANT(S) CLAIMS AFTER 1st AMENDMENT AFTER 2nd AMENDMENT AS FILED IND. DEP. DEP. IND. DEP. DEP. IND. DEP. IND. TOTAL IXD. TOTAL IND. **(E)** • TOTAL DEP. YOYAL CLAIMS TOTAL DEP. -34-7 TOTAL 2 % -

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

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